

## **Site Accreditation Report – Dr. Mark Bontreger**

**Completed: July 11th, 2018**

**Levels of Care Reviewed:**

**Substance Use Disorder (SUD) Services**

**Outpatient Services**

**Review Process:** Dr. Mark Bontreger was reviewed by Division of Behavioral Health staff for adherence to the Administrative Rules of South Dakota (ARSD) and Contract Attachments. The following information was derived from the on-site accreditation survey of your agency. This report includes strengths, recommendations, and citations for Plans of Corrections and results from reviewing policies and procedures, case file records, and conducting interviews with clients, administration, and agency staff.

**Administrative Review Score: 90.4%**

**Combined Client Chart Review Score: 96.9%**

**Cumulative Score: 95.9%**

---

### **ADMINISTRATIVE REVIEW SUMMARY**

#### **Strengths:**

Dr. Mark Bontreger is a strong director who is invested in the staff. The agency's employees are knowledgeable and invested in the needs and well-being of their clients. Staff interviewed report positive feedback about the support from the director which helps to create longevity with the staff. The agency provides a welcoming atmosphere with the intent to make it feel like home. The agency also has positive engagement with other community agencies in the area. The policy and procedure manual is organized and easy to follow.

#### **Recommendations:**

1. The agency references The Division of Community Behavioral Health in their policies and procedures and should update the language to the current name Division of Behavioral Health.

The following areas will require a plan of correction to address each rule of non-compliance which shall include an updated policy and/or procedure, a time frame for implementation of this procedure, the staff position or title responsible for implementation and the staff position or title responsible for ensuring continued compliance of these rules.

#### **Plan of Correction:**

1. The agency shall update their policies and procedures manual to establish compliance with Administrative Rules and procedures for reviewing and updating the manual according to ARSD 67:61:04:01. The agency's policy and procedure manual still references ARSD 46:05 and needs to be updated to reference ARSD 67:61. Dr. Mark Bontreger has detailed policies and procedures that are specifically customized to their agency but needs to be updated to the new rules for full compliance.
2. The agency shall develop root cause analysis policies and procedures to utilize in response to sentinel events according to ARSD 67:61:02:21. The agency shall report to the division within 24 hours of any sentinel event including: death not primarily related to the natural course of the client's illness or underlying condition, permanent harm or severe temporary harm and intervention require to sustain life. A policy and procedure on sentinel events should be created to be in compliance with ARSD 67:61:02:21. The agency did not have a policy regarding sentinel events.

#### **CLIENT CHART REVIEW SUMMARY**

##### **Strengths:**

Supervision provided to the staff is done so in a manner that models a commitment to quality assurance. Progress notes in the charts are individualized in what occurred during the sessions. Treatment plans contained clear and concise short and long term goals as well as objectives. Assessments and discharge summaries are very thorough and easy to follow. The charts are organized and easy to follow. The client interviewed reported positive feedback about the agency and would recommend the services to others.

##### **Recommendations:**

1. According to ARSD 67:61:07:05 assessments need to contain the clinician's signature, credentials, and date. Documents that are signed with a date need to have the correct date as some documents contained dates from 2012 and 2015 but services were received in 2018. In addition, some of the assessments reviewed had the date on the top of the assessments however the date should also be included next to the clinician's signature line to indicate the date the assessment was completed.
2. According to ARSD 67:61:07:05 assessments need to contain past or current indications of trauma, domestic violence, or both; and a few charts that were reviewed did not contain this information. If these areas are not applicable it should be stated to ensure the information was covered during the assessment.